

0010/PTO
Rev. 6/95

U.S. Department of Commerce
Patent and Trademark Office

**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

Attorney Docket Number

5169 US

First Named Inventor

Ting K. Yee

COMPLETE IF KNOWN

Application Number

Unassigned

Filing Date

November 28, 2000

Group Art Unit

Unassigned

Examiner Name

Unassigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OPTICAL COMMUNICATIONS USING HETERODYNE DETECTION

the specification of which

(Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations. § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental sheet attached hereto.

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DECLARATION				Page 2		
I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
U.S. Parent Application Number		PCT Parent Number		Parent Filing Date (MM/DD/YYYY)		
09/474,659				12/29/1999		
				Parent Patent Number (if applicable)		
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.						
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:						
Name		Registration Number		Name		
Greg T. Sueoka		33,800		Michael W. Farn John R. Carr		
				Registration Number		
				41,015 42,390		
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.						
Please direct all correspondence to:						
Michael W. Farn Fenwick & West LLP Two Palo Alto Square Palo Alto, CA 94306 U.S.A.						
Telephone		(650) 858-7823		Fax (650) 494-1417		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Ting		Middle Initial		
		K.		Family Name		
		Yee		Suffix e.g. Jr.		
Inventor's Signature					Date	
Residence: City		Foster City		State		
		CA		Country		
		USA		Citizenship		
		USA				
Mailing Address		348 Dolphin Isle				
Mailing Address						
City		Foster City		State		
		CA		Zip		
		94404		Country		
		USA				
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto						

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0070877-112800

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Peter			Middle Initial	H.	Family Name	Chang			Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City		San Jose			State	CA	Country	USA		Citizenship	USA		
Mailing Address		1232 Donington Drive											
Mailing Address													
City	San Jose			State	CA	Zip	95129		Country	USA			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name				Middle Initial		Family Name				Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City					State		Country			Citizenship			
Mailing Address													
Mailing Address													
City				State		Zip			Country				
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name				Middle Initial		Family Name				Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City					State		Country			Citizenship			
Mailing Address													
Mailing Address													
City				State		Zip			Country				
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name				Middle Initial		Family Name				Suffix e.g. Jr.			
Inventor's Signature								Date					
Residence: City					State		Country			Citizenship			
Mailing Address													
Mailing Address													
City				State		Zip			Country				
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto													

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